

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	E.H.		10-02-01
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	TR	1112	10/23/01
<b>RESPONSE FORMALITY REVIEW</b>	A.M.	JC 780	02-06-02

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3/6/62
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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JC 780  
02-06-02